

SENATOR BYRON DORGAN
1998-99 INTERNSHIP APPLICATION FORM

To apply for an internship send a completed application form, resume, current college transcript, three letters of reference, and a writing sample to:

Senator Byron L. Dorgan
Internships
Box 2250
Fargo, ND 58107

Questions? Call (701) 239-5389 or 1-800-666-4482

PERSONAL INFORMATION

Today's Date: _____

Name: _____ Date of Birth: _____
First Last

Permanent Address: _____

Phone: _____

Current Address: _____

Phone: _____

Name of Parents or Guardians: _____

Address of Parents or Guardians: _____

Phone: _____

University/College: _____

Expected Graduation Date: _____ Major/Minor: _____

Advisor: _____ Advisor's Phone Number: _____

List honors, awards, and leadership positions: _____

Why are you interested in an internship with Senator Dorgan? _____

What skills, qualities and interests do you have that would help you succeed in a U.S. Senate office?

REFERENCES (You must have a business or community leader and a college professor)

Name (community leader)	Address	Phone #
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Name (college advisor/professor)	Address	Phone #
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Name (your choice)	Address	Phone #
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INTERNSHIP PREFERENCES

Internship semester you are applying for:

☐ Fall ☐ Winter/Spring ☐ Summer

Internship location you are applying for:

☐ Washington, DC ☐ Bismarck ☐ Fargo ☐ Minot